

U.S. Department of Justice  
United States Marshals Service

U.S. DISTRICT COURT - N.D. OF N.Y.

FILED

DEC 12 2024

## PROCESS RECEIPT AND RETURN

See instructions for "Service of Process by U.S. Marshal"

PLAINTIFF  
United States of AmericaCOURT CASE NUMBER  
1:24-cv-1345 (MAD/DJS)DEFENDANT  
One 2003 Ferrari Enzo AB Version E, VIN #: ZFFCZ56B000132659, et al.TYPE OF PROCESS  
Service

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

SERVE  
AT

Kris Roglieri

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

Rensselaer County Jail, 4000 Main Street, Troy, NY 12180

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

CARLA B. FREEDMAN, United States Attorney  
United States Attorney's Office  
James Hanley Federal Building  
100 South Clinton Street, Syracuse, NY 13261Number of process to be  
served with this Form 285Number of parties to be  
served in this caseCheck for service  
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,  
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Please serve the above named individual with the copies of the following: Verified Complaint in Rem, Warrant for Arrest of  
Articles in Rem and the third party notice.

Signature of Attorney other Originator requesting service on behalf of:

/s/ Elizabeth A. Conger / tkc

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

315-448-0672

DATE

11/6/2024

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total  
number of process indicated.  
(Sign only for USM 285 if more  
than one USM 285 is submitted)

Total Process

1

District of  
Origin

No. 52

District to  
Serve

No. 52

Signature of Authorized USMS Deputy or Clerk

E J J -

Date

11/8/2024

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described  
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion  
then residing in defendant's usual place  
of abode

Address (complete only different than shown above)

Date

12.11.2024

Time

0950

☐ am  
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

65.00

Total Mileage Charges  
including endeavors)

7.37

Forwarding Fee

Total Charges

72.37

Advance Deposits

Amount owed to U.S. Marshal\* or  
(Amount of Refund\*)

REMARKS:

PRIOR EDITIONS  
MAY BE USED

## PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE

4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment,  
if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

FORM USM-285  
Rev. 12/15/80  
Automated 01/00